



Reply to:
 County Board of Supervisors, Fifth District
 385 North Arrowhead Avenue, Fifth Floor
 San Bernardino, CA 92415-0110
 (909) 387-4565

AFTER SCHOOL PROGRAMS MINI-GRANT APPLICATION

Organization Name		
Address		
City	State	Zip Code
Contact Name		
Phone	Fax	
E-mail Address		
Mailing Address (If Different than Above)		
Address		
City	State	Zip
Do you currently have a contract with the County? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If Yes, please list Department(s):		
Executive Director:		
Authorized Representative(s)*		
1.		
2.		
Amount Requesting** \$ _____		
<i>**Maximum award available per mini-grant is \$2,500.00 per program. These one-time funds will be provided to qualified programs on a first-come, first-served basis.</i>		
Please attach a description of your program, including: (1) the days and hours of operation; (2) the classes and activities you provide; (3) how many children you serve, their age range and grade levels, and (4) from what areas of the 5 th District they reside, cities as well as unincorporated areas. Also, tell us specifically what educational materials you intend to purchase with the funds. Finally, attach verification of your non-profit, tax exempt or incorporation status. Check off below all the attachments you have provided with this application.		
Attachments		
<input type="checkbox"/> IRS 501(c)(3) Letter	<input type="checkbox"/> Tax Exempt Letter	
<input type="checkbox"/> Articles of Incorporation	<input type="checkbox"/> Description of Programs	

I certify that all application information is current and correct, that the above named representative(s) is/are authorized to sign for and obtain funding for the above named organization, and that the materials purchased with these fund will be used to provide educational materials for after school programs within San Bernardino County's Fifth District.

 Printed Name of Executive Director or Designee

 Signature of Executive Director or Designee

 Date

County use Only	
Date Received	<input type="checkbox"/> Approved/Amt Funded \$ _____ <input type="checkbox"/> Not Approved

*Mini-grant funds will only be distributed to the Executive Director or those authorized representatives listed above

2007 ASPMG Application
Revised 08/07/07

